

<i>SERFF Tracking Number:</i>	<i>AMNA-127203064</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American National Life Insurance Company of Texas</i>	<i>State Tracking Number:</i>	<i>49014</i>
<i>Company Tracking Number:</i>	<i>AER11AX</i>		
<i>TOI:</i>	<i>L07I Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L07I.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>AER11AX</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: American National Life Insurance Company of Texas

Product Name: AER11AX

SERFF Tr Num: AMNA-127203064 State: Arkansas

TOI: L07I Individual Life - Whole

SERFF Status: Closed-Approved-
Closed

Sub-TOI: L07I.101 Fixed/Indeterminate
Premium - Single Life

Co Tr Num: AER11AX

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Tyra Reed, Amber Adams, Tobie Brink
Disposition Date: 06/30/2011

Date Submitted: 06/08/2011

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Domicile state is
IIPRC member state.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 06/30/2011

State Status Changed: 06/14/2011

Deemer Date:

Created By: Tyra Reed

Submitted By: Tyra Reed

Corresponding Filing Tracking Number:

Filing Description:

RE: American National Life Insurance Company of Texas (NAIC: 71773 FEIN: 75-1016594) Filing Of:

Form ABR11EX – Aviation Exclusion Rider

SERFF Tracking Number: AMNA-127103064

Company Tracking Number: AER11AX

SERFF Tracking Number: AMNA-127203064 State: Arkansas
Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014
Company Tracking Number: AER11AX
TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life
Product Name: AER11AX
Project Name/Number: /
Dear Reviewer:

Please find enclosed the forms listed above for your organization's review and approval.

Form AER11AX is an aviation exclusion rider that can be added to current and future filed and approved life insurance policy(ies) or applicable rider(s). The rider is an exclusionary rider that amends the death benefit provision of the policy/rider to which it is attached due to aviation activities of the Insured. The reasons why this exclusionary rider would be added are:

- At the request of the applicant during the application process.
 - o A checkbox is included on the Aviation Questionnaire, form ANL-AVI-AR, approved 5/13/2011 under SERFF Tracking Number AMNA-127137079.
- As a result of aviation activities verified during the underwriting process for issuance of the policy.
 - o If the rider is included under this scenario, the Owner's approval of the amendment is required before the policy becomes effective.
- As a result of aviation activities verified during the underwriting process for an increase in the face amount of the policy.
 - o If the rider is included under this scenario, the Owner's approval of the amendment is required before the increase in specified amount becomes effective.
- As a result of aviation activities verified during the underwriting process for the issuance of a rider under the base policy on a life other than the primary insured's (such as a spouse term or other insured rider)
 - o If the rider is included under this scenario, the Owner's approval of the amendment is required before the rider becomes effective.
 - o Please note – at this time there are no riders available for American National Life Insurance Company of Texas to which this rider applies.

Currently, the Aviation Exclusion Rider can be used with the following filed/approved (or pending) forms:

Form LDB11AX(10)

Approved 4/14/2011, SERFF Tracking Number AMNA-127025091

Additional information/documentation is as follows:

- Flesch/Compliance Certification
- Statement of Variability
- Any requirement for a third party authorization has been by-passed as this is not a third party filing
- Payment of the required filing fee has been submitted via EFT

As you perform your review should you require any additional information or documentation, please let us know. The contact information as provided under the Companies and Contacts tab is accurate.

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

Project Name/Number: /

Company and Contact

Filing Contact Information

Tyra Reed, Policy Analyst tyra.reed@anico.com
 One Moody Plaza 409-763-1112 [Phone] 5222 [Ext]
 Product Development--14th Floor 409-766-6933 [FAX]
 Galveston, TX 77550

Filing Company Information

American National Life Insurance Company of Texas CoCode: 71773 State of Domicile: Texas
 One Moody Plaza Group Code: 408 Company Type: Life, Health, Annuity
 Galveston, TX 77550 Group Name: State ID Number:
 (409) 763-4661 ext. 5222[Phone] FEIN Number: 75-1016594

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? Yes
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American National Life Insurance Company of Texas	\$100.00	06/08/2011	48455150

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	06/30/2011	06/30/2011
Approved-Closed	Linda Bird	06/14/2011	06/14/2011

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Aviation Exclusion Rider	Tyra Reed	06/28/2011	06/28/2011

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Request to Re-Open	Note To Filer	Linda Bird	06/28/2011	06/28/2011
Request to Re-Open	Note To Reviewer	Tyra Reed	06/27/2011	06/27/2011

Disposition

Rate data does NOT apply to filing.

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form (revised)	Aviation Exclusion Rider		Yes
Form	Aviation Exclusion Rider	Replaced	Yes

Disposition

Comment:

PDF Pipeline for SERFF Tracking Number AMNA-127203064 Generated 06/30/2011 07:49 AM

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form (revised)	Aviation Exclusion Rider		Yes
Form	Aviation Exclusion Rider	Replaced	Yes

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

Project Name/Number: /

Amendment Letter

Submitted Date: 06/28/2011

Comments:

Thank you for re-opening this filing. The corrected form has been attached to the Form Schedule.

Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes:

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
Form AER11AX	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Aviation Exclusion Rider	Initial				50.100	Form AER11AX.pdf

SERFF Tracking Number: AMNA-127203064 *State:* Arkansas
Filing Company: American National Life Insurance Company of Texas *State Tracking Number:* 49014
Company Tracking Number: AER11AX
TOI: L07I Individual Life - Whole *Sub-TOI:* L07I.101 Fixed/Indeterminate Premium - Single Life
Product Name: AER11AX
Project Name/Number: /

Note To Reviewer

Created By:

Tyra Reed on 06/27/2011 08:14 AM

Last Edited By:

Tyra Reed

Submitted On:

06/27/2011 08:14 AM

Subject:

Request to Re-Open

Comments:

During our post-approval review, we noticed that Page 2 of the submitted form contained an incorrect company name. American National Life Insurance Company of New York should be American National Life Insurance Company of Texas.

Can this filing be re-opened so that we may provide a corrected copy?

Thank you!

SERFF Tracking Number: AMNA-127203064 State: Arkansas

Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014

Company Tracking Number: AER11AX

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: AER11AX

Project Name/Number: /

Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	Form AER11AX	Policy/Cont Aviation Exclusion ract/Fratern Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50.100	Form AER11AX.pdf



American National Life Insurance
Company of Texas

HOME OFFICE: [ONE MOODY PLAZA, GALVESTON TX 77550]
ADMINISTRATIVE OFFICE: [ONE MOODY PLAZA, GALVESTON TX 77550]
TELEPHONE NUMBER [(409) 763-4661]

(The telephone number above is available for Policyholders to make inquiries or obtain information about coverage and provide assistance in resolving complaints.)

AVIATION EXCLUSION RIDER

Policy Number [12345678] [John Insured] **Insured**
Rider Effective Date [6/6/2011]

IMPORTANT NOTE: This Rider amends the Death Benefit provision of the above Policy due to aviation activities and is effective as of the Rider Effective Date shown. Please read Your Policy and all Riders carefully.

RIDER. This Rider is a part of the Policy to which it is attached, issued by American National Life Insurance Company of Texas ("We", "Us", "Our"). Unless changed by this Rider, all terms, exclusions, limitations and provisions of the Policy remain as is and apply to this Rider. Any capitalized terms not defined in this Rider have the meaning given in the Policy to which this Rider is attached.

If death of the Insured occurs while the Insured is:

- operating;
- riding in; or
- descending from

any kind of aircraft as a:

- pilot;
- officer; or
- member of the crew

of such aircraft while the Insured is giving or receiving any type of training or instruction aboard such aircraft; or while the Insured has any duties aboard such aircraft or requiring descent therefrom, the Death Benefit will be limited to the greater of (A) and (B) where:

- (A) The sum of all premiums paid for the Policy, plus interest from the respective due date of each premium to the date of death at an annual interest rate of 3.5%; or
- (B) The reserve for the Policy at the date of death.

In no event shall the Death Benefit be greater than the amount payable in the absence of this provision. The Death Benefit under this provision shall be reduced by any Policy Debt.

The limitation of the proceeds at death as provided for in this provision shall also apply to:

- (1) Any reduced paid-up or extended term insurance put in force in accordance with any nonforfeiture provision under the Policy; and
- (2) Any policy to which this Policy may be changed or converted to.

REMOVAL OF RIDER. You may request that this Rider be removed by sending the following to Our Administrative Office:

- (1) A written request to remove this Rider.
- (2) Evidence of insurability and any additionally required questionnaires for the Insured; and
- (3) The Entire Contract as defined in the Policy.

Removal of this Rider will become effective upon Our acceptance of the request for removal and endorsement of the Policy. The removal of this Rider may result in a change in the amount of the charge for the Policy.

By signing below, I hereby acknowledge and agree that the above listed Policy is issued with this Aviation Exclusion Rider and a copy of the Rider is attached to and made a part of such Policy. I also agree that I have read, understand, and accept the terms of this Rider.

Signature of Owner

Date

Signed for American National Life Insurance Company of Texas at its Administrative Office in [Galveston, Texas]

[]

[J. Mark Flippin]
[Secretary]

SERFF Tracking Number: AMNA-127203064 State: Arkansas
 Filing Company: American National Life Insurance Company of Texas State Tracking Number: 49014
 Company Tracking Number: AER11AX
 TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life
 Product Name: AER11AX
 Project Name/Number: /

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: AR - Certification of Compliance.pdf		
	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: application and actuarial memorandum requirements are not applicable to the exclusuionary rider submitted. Comments:		
	Item Status:	Status Date:
Bypassed - Item: Life & Annuity - Acturial Memo Bypass Reason: application and actuarial memorandum requirements are not applicable to the exclusuionary rider submitted. Comments:		
	Item Status:	Status Date:
Satisfied - Item: Statement of Variability Comments: Attachment: MVM - Form AER11AX.pdf		



American National Life Insurance
Company of Texas

CERTIFICATION OF COMPLIANCE

The Company has reviewed the captioned form(s) below, and certifies that to the best of its knowledge and belief, the form(s) submitted is (are) in compliance with the following:

Rule & Regulation 19

Rule & Regulation 49

(compliance achieved with issuance of base policy, which includes guaranty association notice).

ACA 23-79-138 and Bulletin 15-2009

compliance achieved with issuance of base policy, which includes the contact information).

ACA 23-80-206 (Flesch Certification, minimum of 40)

<u>Form</u>	<u>Form Name</u>	<u>Scoring(s)</u>
Form AER11AX	Aviation Exclusion Rider	50.1

Rex D. Hemme

Senior Vice President & Actuary

American National Life Insurance Company of Texas



American National Life Insurance
Company of Texas

**MEMORANDUM OF VARIABLE MATERIAL FOR
Form AER11AX
June 7, 2011**

This memorandum was prepared for use with Form AER11AX, an exclusionary rider for American National Life Insurance Company of Texas.

Variable material contained within the form denoted by use of brackets.

Variable Material

The form contains the following permissible variable material:

Home Office Address
Administrative Office Address
Telephone Number
Officer Names, Titles, and Signatures

The above noted items, if changed, will be changed in accordance with department standards. It is understood that the items noted above may be changed without notice or prior approval.

The form also contains the following variable material, considered illustrative:

Policy Number – will display the policy number to which the exclusionary rider is attached
Insured – will display the name of the Insured to which the exclusionary rider applies
Rider Effective Date – will display the effective date of the exclusionary rider

We hereby certify to the following:

- The final form issued to the consumer will not contain brackets denoting variable text;
- Any variable text included in this Statement of Variability will be effective only for future issues;
- The use of variable text will be administered in a uniform and non-discriminatory manner, and will not result in unfair discrimination;
- Only text included in this Statement will be allowed to be used on the referenced forms received by consumers; and
- Any changes to variable or permissible ranges of values will be submitted for approval prior to implementation, as required.

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Product Name: AER11AX

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Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/07/2011	Form	Aviation Exclusion Rider	06/28/2011	Form AER11AX.pdf (Superceded)



American National Life Insurance
Company of Texas

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If death of the Insured occurs while the Insured is:

- operating;
- riding in; or
- descending from

any kind of aircraft as a:

- pilot;
- officer; or
- member of the crew

of such aircraft while the Insured is giving or receiving any type of training or instruction aboard such aircraft; or while the Insured has any duties aboard such aircraft or requiring descent therefrom, the Death Benefit will be limited to the greater of (A) and (B) where:

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By signing below, I hereby acknowledge and agree that the above listed Policy is issued with this Aviation Exclusion Rider and a copy of the Rider is attached to and made a part of such Policy. I also agree that I have read, understand, and accept the terms of this Rider.

Signature of Owner

Date

Signed for American National Life Insurance Company of New York at its Administrative Office in [Galveston, Texas]

[]

[J. Mark Flippin]
[Secretary]